

Section:

Interviewer:

Major Cross Streets:

Date:

Interview question responses:

Avg ____.

Tempe Youth Employment Program
480-350-5627
Registration-Application

1. Fill out application **COMPLETELY**-including **SOCIAL SECURITY NUMBER**, and **PARENT SIGNATURE** if under 18 years old.
2. Call to make an appointment for **two-hour** Job-Seeking Skills Workshop.
3. Workshops will be at various Tempe locations.
4. Applicants must be on time for workshops.

Name: _____ **Social Security:** ____/____/____
First Middle Last

Address: _____ **City:** Tempe **State:** AZ **Zip:** _____

Phone: _____ **Alt.Phone/Pager:** _____ **E-mail:** _____

Birth date: ____/____/____ **Age:** _____ **Gender:** M F

Ethnicity: ____Caucasian ____Black ____Hispanic ____Native American ____Asian ____Other
(For Statistical Purposes)

List types of experience, including domestic and volunteer:

List any special skills (i.e.bi-lingual), training/ certificates: _____

Check off all types of work in which you are interested:

<input type="checkbox"/> Child Care	<input type="checkbox"/> Landscape	<input type="checkbox"/> Housecleaning	<input type="checkbox"/> Odd Jobs	<input type="checkbox"/> Tutor
<input type="checkbox"/> Clerical/office	<input type="checkbox"/> Telemarketing	<input type="checkbox"/> Customer Svs.	<input type="checkbox"/> Retail	<input type="checkbox"/> Grocery
<input type="checkbox"/> Warehouse	<input type="checkbox"/> Construction	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Assembly	<input type="checkbox"/> Security
<input type="checkbox"/> Entertainment	<input type="checkbox"/> Special Events	<input type="checkbox"/> Recreation	<input type="checkbox"/> Restaurant	

Transportation: __own vehicle __parents __bus __bike/walk __other

Check off any equipment with which you have experience and are able to use on a job:

☐ lawn mower ☐ weed eater/trimmer ☐ hand tools ☐ car
☐ truck ☐ computer ☐ other: _____

List any restrictions or medical issues with regard to working? _____

School information:

“Out-of-school” Youth

___ NOT enrolled in school highest grade completed: ___ Where: _____

___ Enrolled in school current/last grade completed: ___ Where: _____

Hours in school: _____

Traditional school year or Year-Round

Circle one

Available: (check all that apply)

___ Full time ___ Part time ___ Temporary/Occasional ___ Summer Only
___ Saturdays ___ Sundays ___ Weekdays ___ Evenings

Previous Employment:

Company/Individual: _____ Company/Individual: _____

Position: _____ Position: _____

Address: _____ Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

References:

Name: _____ Name: _____

Occupation: _____ Occupation: _____

Address: _____ Address: _____

City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____

How did you learn about the Tempe Youth Employment Program?

___ Friend/Family ___ School ___ Diversion/Probation ___ Social Services
___ Leisure Brochure ___ Internet ___ Jobs for Valley Youth ___ Used before
___ Other: _____

_____ Has my permission to participate in the City of Tempe Youth Employment Program. I am aware that the Youth Employment Program does not perform background checks on employer. Therefore, the staff strongly recommend parents accompany students on domestic job interviews.

Signature of Parent/Guardian

(Necessary if youth is under 18 years old)

Signature of Youth Applicant

Date: _____